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Information for patients Botox Injections



Alice Ward



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Botox (Botulinum Toxin) Injections in children and young people

This leaflet has been provided because your surgeon feels that Botox treatment may be useful for your child. It will explain more about the use of Botox injections in children and young people, and what to expect following treatment.

What is Botox?

Botox (Botulinum Toxin type A) is a naturally occurring toxin produced by the bacterium Clostridium botulinum. This can be produced in the laboratory to be used for medicinal purposes. It has been used to treat various conditions in both children and adults for a long time. The amount used is very small, and is both effective and safe. It works by temporarily blocking a chemical messenger that travels from the nerves to the muscle. This allows the muscle to be more relaxed and less stiff

Why is Botox Used?

Movement disorders such as cerebral palsy, and other neurological conditions often lead to problems with how the muscles work. The muscles can often be stiff and overactive (spasticity), or working in an uncontrolled and unpredictable way (dystonia). The abnormal muscle activity can cause problems such as pain, limited movement of the joints, difficulties walking, difficulties with daily care, or problems fitting splints. By relaxing the affected muscles with Botox, this may improve some of the problems your child is experiencing.

How is the Botox given?

Botox is administered as an injection directly into the affected muscle. Although Botox injections can be performed whilst awake, it usually requires more than one injection. Most children will therefore have this performed asleep (general anaesthetic) in the operating theatre. This allows us to make sure that we can give the injections with minimal distress and discomfort. It also allows us to assess the movement in the joints when the muscles are less active, which is an important part of monitoring the impact of muscle stiffness.

Sometimes the Botox will be combined with a plaster cast or splint that is applied in theatre. Your surgeon will discuss with you beforehand if additional treatment is required.

What happens after the Botox injection?

Botox injection is usually performed as a day case procedure. Following a general anaesthetic your child will need to stay on the ward for a few hours to ensure they have fully recovered from the anaesthetic. Your child will usually be allowed to carry on with all normal activities following the Botox.

What happens after having Botox injections?

Before going home, the ward physiotherapists may see your child to discuss physiotherapy exercises. This is important in order to maximise the benefits of the Botox. They will also ensure that the community physiotherapists continue to provide support after leaving hospital. Your surgeon will usually make arrangements to see your child in the clinic a few months after the Botox to assess the response.

The Botox will take a few days to start working, but can take a few weeks to see the full effects. The effects of Botox are variable, but usually last up to 6-months. If the Botox has been effective, repeat treatment may be appropriate in the future. However, your surgeon will decide on this. This is not usually repeated for at least 6–12 months

Are there any risks or side effects?

Botox has been routinely used in children for a number of years. Serious side effects or complications are extremely rare. However, as with all medicines there are possible mild side effects to be aware of. As the Botox is not immediately effective these can occur within the first few days following the injection. Side effects include:

- Pain or bruising at the injection site
- Flu-like symptoms
 - Mild flu-like symptoms (headache, aches & pain, mild fever)can occur in some children following the injection. This is not a cause for concern and symptoms can be treated with paracetamol if necessary.
- Muscle weakness
 - This is normal following Botox, but occasionally the Botox can be a little too effective. This can lead to a temporary increase in falls, difficulty with balance, or a change in walking pattern. These should improve as the effects of Botox wears off.

Severe complications from Botox are very rare, and usually only seen with very high doses of Botox. The dosage of Botox we routinely use at RJAH is well below the recommended safe limits. The rare but potentially serious effects include difficulty with breathing or swallowing. If you have any concerns following the injection you should seek immediate medical advice